

Fill in this information to identify the case:

Debtor name Virginia-Highland Restaurant, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number (if known) 20-70718

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 6, 2020

X /s/ Jeffrey R. Landau

Signature of individual signing on behalf of debtor

Jeffrey R. Landau

Printed name

Managing Member

Position or relationship to debtor

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Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**
Copy line 88 from *Schedule A/B*..... \$ 314,873.00

1b. **Total personal property:**
Copy line 91A from *Schedule A/B*..... \$ 0.00

1c. **Total of all property:**
Copy line 92 from *Schedule A/B*..... \$ 314,873.00

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)
Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 112,983.01

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**
Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 54,825.07

3b. **Total amount of claims of nonpriority amount of unsecured claims:**
Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 188,412.67

4. **Total liabilities**
Lines 2 + 3a + 3b \$ 356,220.75

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☒ No. Go to Part 2.
- ☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
- ☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
- ☐ Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.

Debtor Virginia-Highland Restaurant, LLC
Name

Case number (If known) 20-70718

☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

Nature and extent of debtor's interest in property

Net book value of debtor's interest (Where available)

Valuation method used for current value

Current value of debtor's interest

55.1. **6317 Roswell Road, NE
Sandy Springs, GA 30328**

Lease

\$314,873.00

\$314,873.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$314,873.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description

Net book value of debtor's interest (Where available)

Valuation method used for current value

Current value of debtor's interest

Debtor Virginia-Highland Restaurant, LLC Case number (If known) 20-70718
Name

60. **Patents, copyrights, trademarks, and trade secrets**
61. **Internet domain names and websites**
62. **Licenses, franchises, and royalties**
Licenses, including but not limited to, liquor
licenses issued by the State of Georgia and/or
the City of Sandy Springs \$0.00 Unknown

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor Virginia-Highland Restaurant, LLC
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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$314,873.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$0.00</u>	<u>\$314,873.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$314,873.00</u>

Case number (if known) **20-70718**

Best Case Bankruptcy

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United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	<p>Priority creditor's name and mailing address</p> <p>City of Sandy Springs Business Occupation/Excise Tax 7840 Roswell Road, Bldg. 500 Atlanta, GA 30350</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00	\$0.00
2.2	<p>Priority creditor's name and mailing address</p> <p>Fulton Co. Tax Commissioner 141 Pryor Street Atlanta, GA 30303</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Taxes</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$461.82	\$461.82

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2.3	Priority creditor's name and mailing address Georgia Department of Labor 148 Andrew Young Int'l Blvd. Suite 826 Atlanta, GA 30303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$357.20	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Georgia Department of Revenue 1800 Century Boulevard, NE Suite 9100 Atlanta, GA 30345	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$54,006.05	\$54,006.05
Date or dates debt was incurred		Basis for the claim: Sales Taxes		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Internal Revenue Service 401 W. Peachtree St., NW Stop 334-D Atlanta, GA 30308	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	Virginia-Highland Restaurant, LLC		Case number (if known)	20-70718
Name				
3.1	Nonpriority creditor's name and mailing address 212 Digital Inc. 555 W. Waters Avenue Suite 610 Tampa, FL 33634 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.2	Nonpriority creditor's name and mailing address Advanced Disposal Services PO Box 743019 Atlanta, GA 30374-3019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$433.29	
3.3	Nonpriority creditor's name and mailing address ALiveSound 1774 Indiana Avenue NE Atlanta, GA 30307 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.4	Nonpriority creditor's name and mailing address AmeriPride Services, Inc. PO Box 308 Bemidji, MN 56619-0308 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,333.86	
3.5	Nonpriority creditor's name and mailing address Apex PO Box 888342 Atlanta, GA 30356 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00	
3.6	Nonpriority creditor's name and mailing address ASCAP 21678 Network Place Chicago, IL 60673-1216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47.29	
3.7	Nonpriority creditor's name and mailing address Atlanta Beverage 5000 Fulton Industrial Blvd. Atlanta, GA 30336 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	

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3.8	Nonpriority creditor's name and mailing address Beverage Control Inc. 5215 S. Royal Atlanta Drive Tucker, GA 30084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,630.87
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3.9	Nonpriority creditor's name and mailing address Chef Duds 3000 Shawnee North Drive Suite 350 Suwanee, GA 30024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.10	Nonpriority creditor's name and mailing address City of Atlanta Dept. of Watershed Management PO Box 105275 Atlanta, GA 30348-5275 Date(s) debt was incurred ____ Last 4 digits of account number <u>2304</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,332.54
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3.11	Nonpriority creditor's name and mailing address Comcast PO Box 530098 Atlanta, GA 30353-0098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$510.63
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3.12	Nonpriority creditor's name and mailing address Commercial Kitchen Installers 224 Brown Industrial Pkwy Unit 107 Canton, GA 30114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,059.93
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3.13	Nonpriority creditor's name and mailing address Deborah A Deal dba Blade-Smith 3731 Northcrest Road, #1 Atlanta, GA 30340 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$347.34
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3.14	Nonpriority creditor's name and mailing address DirecTV PO Box 105249 Atlanta, GA 30348-5249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,175.94
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3.15	Nonpriority creditor's name and mailing address Easy Ice PO Box 879 Marquette, MI 49855 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$525.82
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3.16	Nonpriority creditor's name and mailing address Ecolab Pest Elimination Div. 26252 Network Place Chicago, IL 60673-1262 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$581.52
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3.17	Nonpriority creditor's name and mailing address Edward Don & Company 84 Stemmers Lane Attn: Tasha Young Westhampton, NJ 08060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,546.94
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3.18	Nonpriority creditor's name and mailing address Empire Distributors, Inc. PO Box 43166 Atlanta, GA 30336 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.19	Nonpriority creditor's name and mailing address Fire Equipment Specialists Co. PO Box 440242 Kennesaw, GA 30144 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.20	Nonpriority creditor's name and mailing address Fulton Co. Dept. of Water Res. Water Resources Operation Ctr. 11575 Maxwell Road Alpharetta, GA 30009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.21	Nonpriority creditor's name and mailing address Gather Technologies, Inc. 300 Baker Avenue Suite 205 Concord, MA 01742 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Virginia-Highland Restaurant, LLC Name	Case number (if known)	20-70718
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3.22	Nonpriority creditor's name and mailing address General Wholesale 1595 Marietta Blvd., NW Atlanta, GA 30318-3642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.23	Nonpriority creditor's name and mailing address Georgia Crown PO Box 43066 Atlanta, GA 30378 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.24	Nonpriority creditor's name and mailing address Georgia Power 96 Annex Atlanta, GA 30396 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,980.44
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3.25	Nonpriority creditor's name and mailing address Heck, Inc. PO Box 2716 Kennesaw, GA 30156 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.26	Nonpriority creditor's name and mailing address HVAC Allies LLC 2479 Yolanda Trail Ellenwood, GA 30294 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$610.20
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3.27	Nonpriority creditor's name and mailing address Joe Hand Promotions 407 E. Pennsylvania Blvd. Feasterville Trevose, PA 19053 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.28	Nonpriority creditor's name and mailing address National Distributors PO Box 44127 Atlanta, GA 30336 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Virginia-Highland Restaurant, LLC Name	Case number (if known)	20-70718
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3.29	Nonpriority creditor's name and mailing address NCR Local - Atlanta 375 Franklin Gateway Suite 400 Marietta, GA 30067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.30	Nonpriority creditor's name and mailing address Office Depot PO Box 633211 Cincinnati, OH 45263-3211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.31	Nonpriority creditor's name and mailing address Premier Grease PO Box 3535 Alpharetta, GA 30023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$630.67
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3.32	Nonpriority creditor's name and mailing address Protection One Alarm Monitor 74 Southwoods Pkwy. Suite 700 Atlanta, GA 30354 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$515.92
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3.33	Nonpriority creditor's name and mailing address Restaurant Group Management c/o Amy Landau PO Box 20178 Atlanta, GA 30325 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.34	Nonpriority creditor's name and mailing address Savannah Distributing Co. 2003 S. Bibb Drive Tucker, GA 30084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.35	Nonpriority creditor's name and mailing address Scana Energy PO Box 100157 Columbia, SC 29202-3157 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,035.47
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Debtor **Virginia-Highland Restaurant, LLC**
Name

Case number (if known) **20-70718**

3.36	Nonpriority creditor's name and mailing address Shoes for Crews PO Box 504634 Saint Louis, MO 63150-4634 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.37	Nonpriority creditor's name and mailing address Sidney Lee Welding Supply PO Box 429 Hampton, GA 30228 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.38	Nonpriority creditor's name and mailing address SRPF A/Marshalls Plaza LLC c/o Stream Realty Partners 1180 W. Peachtree St, Ste 500 Atlanta, GA 30309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$158,214.00
3.39	Nonpriority creditor's name and mailing address United Distributors 5500 United Drive Smyrna, GA 30082 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	SRPF A/Marshall's Plaza LLC c/o CT Corporation System 289 S. Culver Street Lawrenceville, GA 30046-4805	Line <u>3.38</u> <input type="checkbox"/> Not listed. Explain ____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ 54,825.07
5b. Total claims from Part 2	5b. + \$ 188,412.67
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ 243,237.74

Fill in this information to identify the case:

Debtor name Virginia-Highland Restaurant, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number (if known) 20-70718

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Master Distribution Agreement, as amended**

State the term remaining

List the contract number of any government contract

**Gordon Food Service, Inc.
PO Box 88029
Chicago, IL 60680**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Facility management agreement**

State the term remaining

List the contract number of any government contract

December 31, 2021 plus two five-year options

**Restaurant Group Management
PO Box 20178
Atlanta, GA 30325**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Marshall's Plaza Shopping Center, LLC restaurant lease**

State the term remaining

List the contract number of any government contract

December 31, 2021 plus two five-year options

**SRPF A/Marshall's Plaza, LLC
PO Box 105732
Atlanta, GA 30348**

Fill in this information to identify the case:

Debtor name Virginia-Highland Restaurant, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number (if known) 20-70718

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Amy Landau 183 12th Street, NE
Atlanta, GA 30309

Georgia Department
of Revenue

☐ D _____
☒ E/F 2.4
☐ G _____

2.2 Jeffrey Landau 183 12th Street, NE
Atlanta, GA 30309

SRPF A/Marshalls
Plaza LLC

☐ D _____
☒ E/F 3.38
☐ G _____

2.3 Jeffrey Landau 183 12th Street, NE
Atlanta, GA 30309

Georgia Department
of Revenue

☐ D _____
☒ E/F 2.4
☐ G _____

Fill in this information to identify the case:

Debtor name Virginia-Highland Restaurant, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number (if known) 20-70718

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☒ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. See Attachment SFA-3		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

Debtor **Virginia-Highland Restaurant, LLC**Case number (if known) **20-70718****4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See Attachment SFA-4		\$0.00	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. SRPF A/Marshall's Plaza, LLC v. Virginia-Highland Restaurant, LLC, d/b/a Hudson Grille 20DD000049	Dispossessory	State Court of Fulton County	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Debtor **Virginia-Highland Restaurant, LLC**Case number (if known) **20-70718****Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Chapter 11 retainer on a consolidated basis for both Debtors		
Scroggins & Williamson, PC 4401 Northside Parkway Suite 450 Atlanta, GA 30327	\$14,161.50 payment for pre-petition services rendered	October 9, 2020	\$0.00
	\$25,838.50 Chapter 11 retainer		
Email or website address			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Debtor **Virginia-Highland Restaurant, LLC**Case number (if known) **20-70718**☐ Does not apply**Address****Dates of occupancy
From-To**14.1. **1119 Logan Circle, NW
Atlanta, GA 30318****2011 - May 1, 2020****Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address**Nature of the business operation, including type of services
the debtor provides****If debtor provides meals
and housing, number of
patients in debtor's care****Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None**Financial Institution name and
Address****Last 4 digits of
account number****Type of account or
instrument****Date account was
closed, sold,
moved, or
transferred****Last balance
before closing or
transfer****19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None**Depository institution name and address****Names of anyone with
access to it
Address****Description of the contents****Do you still
have it?****20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

Debtor Virginia-Highland Restaurant, LLCCase number (if known) 20-70718☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed

Debtor **Virginia-Highland Restaurant, LLC**Case number (if known) **20-70718****26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. Simon Eapen 1878 Autumn Sage Drive Dacula, GA 30019	October, 2017 - Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. Simon Eapen 1878 Autumn Sage Drive Dacula, GA 30019	October, 2017 - Present

Name and address	Date of service From-To
26b.2. James Bellew 460 Shadowlawn Road Marietta, GA 30067	2011 - Present

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Restaurant Group Management, LLC PO Box 20178 1984 Howell Moll Road, NW Atlanta, GA 30325	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. Ameris Bank 3490 Piedmont Road, NE Suite 750 Atlanta, GA 30305

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor **Virginia-Highland Restaurant, LLC**

Case number (if known) **20-70718**

Name	Address	Position and nature of any interest	% of interest, if any
LBA Holdings, LLC	PO Box 20178 Atlanta, GA 30325	Member	99%
Name	Address	Position and nature of any interest	% of interest, if any
James Bellew	460 Shadowlawn Road Marietta, GA 30067	Member	1%
Name	Address	Position and nature of any interest	% of interest, if any
Metrocafes Management LLC	PO Box 20178 Atlanta, GA 30325	Manager	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 See Attachment SFA-30			
Relationship to debtor			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
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Debtor Virginia-Highland Restaurant, LLC

Case number (if known) 20-70718

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 6, 2020

/s/ Jeffrey R. Landau

Signature of individual signing on behalf of the debtor

Jeffrey R. Landau

Printed name

Position or relationship to debtor Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No

☒ Yes

Attachment SFA-3

NOTE: All transfers shown were made from accounts maintained by Restaurant Group Management LLC for the benefit of the Hudson Grille Sandy Springs restaurant. There has been no determination as to whether any particular transfer might be legally deemed to be made by or for the benefit of either or both Debtors.

Voucher Number	Vendor ID	Document Type	Document Date	Document Number	Document Amount	Vendor Name
200610968	DIRHGS	Payment	7/21/2020	051001	1,354.58	DirecTV
200611064	DIRHGS	Payment	8/31/2020	051003	719.20	DirecTV
200611106	DIRHGS	Payment	9/18/2020	200611106	1,681.25	DirecTV
200611143	DIRHGS	Payment	10/5/2020	513487	3,175.94	DirecTV
200611158	DIRHGS	Payment	10/12/2020	513490	381.25	DirecTV
					7,312.22	
200610961	GEOPOWHGS	Payment	7/15/2020	41796493	5,033.15	Georgia Power
200611018	GEOPOWHGS	Payment	8/7/2020	89628221	5,184.44	Georgia Power
200611072	GEOPOWHGS	Payment	9/1/2020	72975696	6,003.39	Georgia Power
200611139	GEOPOWHGS	Payment	9/29/2020	59048886	5,854.69	Georgia Power
					22,075.67	
200611009	GORFOO	Payment	7/14/2020	200611009	4,331.83	Gordon Food Service Inc.
200611010	GORFOO	Payment	7/16/2020	200611010	2,189.21	Gordon Food Service Inc.
200611011	GORFOO	Payment	7/21/2020	200611011	3,765.44	Gordon Food Service Inc.
200611012	GORFOO	Payment	7/23/2020	200611012	1,946.93	Gordon Food Service Inc.
200611013	GORFOO	Payment	7/28/2020	200611013	3,210.23	Gordon Food Service Inc.
200611014	GORFOO	Payment	7/30/2020	200611014	2,340.48	Gordon Food Service Inc.
200611015	GORFOO	Payment	7/31/2020	200611015	914.07	Gordon Food Service Inc.
200611050	GORFOO	Payment	8/4/2020	200611050	2,407.55	Gordon Food Service Inc.
200611051	GORFOO	Payment	8/6/2020	200611051	3,070.56	Gordon Food Service Inc.

200611052	GORFOO	Payment	8/11/2020 200611052	5,003.75	Gordon Food Service Inc.
200611053	GORFOO	Payment	8/13/2020 200611053	1,208.23	Gordon Food Service Inc.
200611054	GORFOO	Payment	8/18/2020 200611054	6,466.85	Gordon Food Service Inc.
200611055	GORFOO	Payment	8/20/2020 200611055	1,154.28	Gordon Food Service Inc.
200611056	GORFOO	Payment	8/21/2020 200611056	110.74	Gordon Food Service Inc.
200611057	GORFOO	Payment	8/25/2020 200611057	3,851.59	Gordon Food Service Inc.
200611070	GORFOO	Payment	8/27/2020 200611070	1,648.85	Gordon Food Service Inc.
200611071	GORFOO	Payment	9/1/2020 200611071	4,090.12	Gordon Food Service Inc.
200611082	GORFOO	Payment	9/3/2020 200611082	2,302.62	Gordon Food Service Inc.
200611109	GORFOO	Payment	9/9/2020 200611109	5,459.85	Gordon Food Service Inc.
200611110	GORFOO	Payment	9/10/2020 200611110	1,968.84	Gordon Food Service Inc.
200611111	GORFOO	Payment	9/11/2020 200611111	446.49	Gordon Food Service Inc.
200611112	GORFOO	Payment	9/15/2020 200611112	9,330.21	Gordon Food Service Inc.
200611113	GORFOO	Payment	9/17/2020 200611113	2,286.31	Gordon Food Service Inc.
200611120	GORFOO	Payment	9/22/2020 200611120	7,251.75	Gordon Food Service Inc.
200611121	GORFOO	Payment	9/24/2020 200611121	989.42	Gordon Food Service Inc.
200611153	GORFOO	Payment	9/29/2020 200611153	5,089.44	Gordon Food Service Inc.
200611154	GORFOO	Payment	10/1/2020 200611154	3,090.36	Gordon Food Service Inc.
200611168	GORFOO	Payment	10/6/2020 200611168	6,974.01	Gordon Food Service Inc.
200611169	GORFOO	Payment	10/8/2020 200611169	1,164.90	Gordon Food Service Inc.
200611203	GORFOO	Payment	10/13/2020 200611203	7,033.43	Gordon Food Service Inc.
				101,098.34	
200610966	UNIDIS	Payment	7/13/2020 43000091249987	549.09	United Distributors
200610980	UNIDIS	Payment	7/17/2020 43000091411424	265.00	United Distributors
200610976	UNIDIS	Payment	7/17/2020 43000091411383	126.35	United Distributors

200610981	UNIDIS	Payment	7/20/2020 43000091459607	266.99	United Distributors
200611030	UNIDIS	Payment	8/7/2020 91408592056270	176.37	United Distributors
200611032	UNIDIS	Payment	8/10/2020 43000092116087	72.00	United Distributors
200611041	UNIDIS	Payment	8/14/2020 91408592306002	244.19	United Distributors
200611061	UNIDIS	Payment	8/21/2020 43000092547245	203.30	United Distributors
200611093	UNIDIS	Payment	9/4/2020 91408593004918	629.84	United Distributors
200611100	UNIDIS	Payment	9/11/2020 91408593254248	486.49	United Distributors
200611117	UNIDIS	Payment	9/18/2020 43000093532668	1,636.28	United Distributors
200611136	UNIDIS	Payment	9/25/2020 91408593738571	580.69	United Distributors
200611151	UNIDIS	Payment	10/2/2020 43000093997059	1,003.24	United Distributors
200611162	UNIDIS	Payment	10/7/2020 43000094128894	851.00	United Distributors
200611167	UNIDIS	Payment	10/9/2020 43000094274226	121.20	United Distributors
				7,212.03	

Attachment SFA-4

NOTE: All transfers shown were made from accounts maintained by Restaurant Group Management LLC for the benefit of the Hudson Grille Sandy Springs restaurant. There has been no determination as to whether any particular transfer might be legally deemed to be made by or for the benefit of either or both Debtors.

Payments to or for the benefit of SRPF A/Marshalls Plaza LLC

Rent Paid Directly to Landlord

Oct 2019 Rent	Check# 513093	\$22,868.60
Nov 2019 Rent	Check#513140	\$22,868.60
Dec 2019 Rent	Check#513168	\$22,868.60
Jan 2020 Rent	Check#513260	\$22,868.60
Feb 2020 Rent	Check#513257	\$22,868.60

Rent Paid into Registry of Court in Dispossessory Action

08/11/2020	\$135,284.63
09/08/2020	\$22,929.41
10/01/2020	\$22,929.41

Attachment SFA-30

NOTE: All transfers shown were made from accounts maintained by Restaurant Group Management LLC for the benefit of the Hudson Grille Sandy Springs restaurant. There has been no determination as to whether any particular transfer might be legally deemed to be made by or for the benefit of either or both Debtors.

Payments to Related Parties

<u>Date</u>	<u>Amount</u>	<u>Payee</u>
01/02/20	\$6,000.00	Restaurant Group Management LLC
01/07/20	\$200.00	Restaurant Group Management LLC
01/07/20	\$4,000.00	1069 Juniper LLC
01/09/20	\$2,300.00	Restaurant Group Management LLC
01/10/20	\$3,100.00	1069 Juniper LLC
01/13/20	\$1,500.00	Restaurant Group Management LLC
01/13/20	\$2,000.00	Restaurant Group Management LLC
01/13/20	\$3,000.00	1069 Juniper LLC
01/14/20	\$8,000.00	1043 Juniper Street LLC
01/14/20	\$2,000.00	Restaurant Group Management LLC
01/15/20	\$1,000.00	Restaurant Group Management LLC
01/15/20	\$4,000.00	1069 Juniper LLC
01/16/20	\$1,000.00	Restaurant Group Management LLC
01/17/20	\$800.00	Restaurant Group Management LLC
01/21/20	\$4,000.00	Restaurant Group Management LLC
01/21/20	\$5,000.00	Restaurant Group Management LLC
01/21/20	\$1,200.00	Restaurant Group Management LLC
01/21/20	\$9,000.00	1069 Juniper LLC
01/23/20	\$1,000.00	Restaurant Group Management LLC
01/27/20	\$5,300.00	Restaurant Group Management LLC
01/27/20	\$450.00	Restaurant Group Management LLC
01/27/20	\$7,000.00	Restaurant Group Management LLC
01/31/20	\$3,000.00	Restaurant Group Management LLC
01/31/20	\$800.00	Park Village Atlanta LLC
02/03/20	\$300.00	Restaurant Group Management LLC
02/03/20	\$300.00	Restaurant Group Management LLC
02/04/20	\$8,000.00	Restaurant Group Management LLC
02/06/20	\$5,000.00	Restaurant Group Management LLC
02/06/20	\$1,400.00	Restaurant Group Management LLC
02/06/20	\$1,000.00	Restaurant Group Management LLC
02/06/20	\$3,000.00	Restaurant Group Management LLC
02/06/20	\$3,600.00	Restaurant Group Management LLC
02/06/20	\$4,000.00	Restaurant Group Management LLC
02/06/20	\$1,300.00	Restaurant Group Management LLC

02/07/20	\$2,000.00	1069 Juniper LLC
02/10/20	\$4,000.00	Restaurant Group Management LLC
02/11/20	\$3,500.00	Restaurant Group Management LLC
02/12/20	\$800.00	Restaurant Group Management LLC
02/13/20	\$2,000.00	Restaurant Group Management LLC
02/18/20	\$2,000.00	Restaurant Group Management LLC
02/21/20	\$4,000.00	Restaurant Group Management LLC
02/25/20	\$800.00	Restaurant Group Management LLC
02/27/20	\$3,100.00	Restaurant Group Management LLC
02/28/20	\$1,500.00	Restaurant Group Management LLC
03/02/20	\$8,800.00	Restaurant Group Management LLC
03/04/20	\$2,000.00	Restaurant Group Management LLC
03/09/20	\$5,000.00	Restaurant Group Management LLC
03/09/20	\$2,000.00	1069 Juniper LLC
03/11/20	\$1,700.00	Restaurant Group Management LLC
03/12/20	\$1,500.00	Restaurant Group Management LLC
03/12/20	\$1,000.00	Restaurant Group Management LLC
03/24/20	\$3,000.00	Restaurant Group Management LLC
03/30/20	\$2,000.00	Park Village Atlanta LLC
03/31/20	\$800.00	Restaurant Group Management LLC
04/07/20	\$100.00	Restaurant Group Management LLC
04/07/20	\$1,000.00	Restaurant Group Management LLC
04/07/20	\$4,000.00	Park Village Atlanta LLC
04/07/20	\$200.00	Restaurant Group Management LLC
05/12/20	\$200.00	Restaurant Group Management LLC
05/12/20	\$300.00	Restaurant Group Management LLC
05/12/20	\$300.00	Restaurant Group Management LLC
05/13/20	\$500.00	Restaurant Group Management LLC
05/13/20	\$500.00	Restaurant Group Management LLC
05/26/20	\$500.00	1069 Juniper LLC
06/08/20	\$300.00	Restaurant Group Management LLC
06/09/20	\$500.00	Restaurant Group Management LLC
07/24/20	\$5,000.00	Restaurant Group Management LLC
09/25/20	\$1,000.00	Restaurant Group Management LLC

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Northern District of Georgia

In re **Virginia-Highland Restaurant, LLC**

Debtor(s)

Case No. **20-70718**

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept as a retainer	\$	25,838.50
Prior to the filing of this statement I have received as a retainer	\$	25,838.50
Balance Due	\$	0.00

2. \$ **1,717.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

The retainer of \$25,838.50 has been provided on a consolidated basis for the following jointly administered Debtors:

Restaurant 104 LLC and Virginia-Highland Restaurant, LLC

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

11/06/2020

Date

/s/ J. Robert Williamson

J. Robert Williamson 765214

Signature of Attorney

Scroggins & Williamson, P.C.

4401 Northside Parkway

Suite 450

Atlanta, GA 30327

404-893-3880 Fax: 404-893-3886

centralstation@swlawfirm.com

Name of law firm

**United States Bankruptcy Court
Northern District of Georgia**

In re **Virginia-Highland Restaurant, LLC**

Debtor(s)

Case No. **20-70718**

Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
James Bellew 460 Shadowlawn Road Marietta, GA 30067		1%	Member
LBA Holdings, LLC PO Box 20178 Atlanta, GA 30325		99%	Member

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Managing Member** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **November 6, 2020**

Signature **/s/ Jeffrey R. Landau**
Jeffrey R. Landau

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Northern District of Georgia**

In re **Virginia-Highland Restaurant, LLC**

Debtor(s)

Case No. **20-70718**

Chapter **11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Virginia-Highland Restaurant, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

November 6, 2020

Date

/s/ J. Robert Williamson

J. Robert Williamson 765214

Signature of Attorney or Litigant

Counsel for **Virginia-Highland Restaurant, LLC**

Scroggins & Williamson, P.C.

4401 Northside Parkway

Suite 450

Atlanta, GA 30327

404-893-3880 Fax:404-893-3886

centralstation@swlawfirm.com